# Final Release Notes for External Partners

CHRIS 2.9/HPG 3.5.2

Organization	Health Shared Services
_	Ontario
Division:	Business Technology
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# **Document Revision History**

Version No.	Date	Summary of Change	Contributors
1.0	March 20, 2017	Final draft.	F. Williamson

### **Executive Summary**

This document provides specific information on the Enhancements and Provincial Data Updates included in CHRIS 2.9 - HPG 3.5.2 scheduled to be deployed on the evening of April 22<sup>nd</sup>, 2017.

This section provides an executive summary of the projects / major changes and other enhancements included in CHRIS 2.9 and HPG 3.5.2.

#### **Enhancements**

Project	Overview
Connecting South West Ontario (CSWO) (SW, ESC, WW & HNHB CCACs)	<ul> <li>The following improvements have been identified that will be implemented specifically to the cSWO CDR data feed in CHRIS 2.9:</li> <li>Upgrade data feed to meet Connecting Ontario Input Standards v 2.4.3.</li> <li>Add the client's Coordinated Care Plan to the data feed (subject to approval from the Ministry).</li> <li>Implement enhancements items that were identified through Connecting Northern and Eastern Region (caner) implementation.</li> <li>Execute Conformance Testing based on eHealth Ontario Conformance Testing</li> <li>Provide support for Clinical Validation activities performed by the four SWO CCACs</li> </ul>
CCAC Referral Enhancements	Various enhancements. Details in Section 3.
eNotification Enhancements	Various enhancements. Details in Section 4.
Client Name Enhancements	Details in section 6.

# 1 Connecting South West Ontario (CSWO)



Connecting South West Ontario (CSWO) is used by the following CCACs: South West; Waterloo Wellington and HNHB.

#### 1.1 Business Need

**Connecting Ontario** brings together local, regional and provincial assets in different parts of the province — connecting them to improve patient care.

The program revolves around **three** major regional partners in the **Greater Toronto Area (GTA)**, **South West Ontario (SWO)**, and **Northern and Eastern Ontario (NEO)**, as well as vendors and stakeholders, working together to deliver electronic health records for every patient in this province. Ultimately, Connecting Ontario will enable province-wide information sharing by linking the regions so clinicians, whether in a doctor's office, community clinic or hospital can receive electronic access to patients' personal health information anywhere, anytime.

**Connecting South West Ontario's (cSWO's)** goal is to implement a regional ehealth program that will make an individual's health information from across the continuum of care available in a timely and secure fashion at any point of care.

#### 1.2 Solution Overview

The CCACs are expected to contribute data to the Connecting Ontario CDR with the support of the OACCAC as well as enable improvements to the data feed as new data requirements and system integrations evolve.

The following improvements have been identified that will be implemented specifically to the cSWO CDR data feed in **CHRIS 2.9**:

- Upgrade data feed to meet Connecting Ontario Input Standards v 2.4.3;
- Add the client's Coordinated Care Plan to the data feed; Coordinated Care Plans (CCP) support the
  work of a patient's health team by providing comprehensive information about the patient's health,
  personal and socio-economic needs and wishes;
- Implement enhancements items that were identified through Connecting Northern and Eastern Region (caner) implementation.

Additionally, the following items are in scope for this project:

- Execute Conformance Testing based on eHealth Ontario Conformance Testing Guide & Worksheets and the use of the Connecting Ontario Viewer to validate the integration feed implementation.
- Provide support for Clinical Validation activities performed by the four SWO CCACs, including:
  - System Integration configuration between CHRIS and the eHealth Ontario Clinical Validation Environment;
  - Migration of active Clients and Referrals from CHRIS Production Environment to eHealth Ontario Clinical Validation Environment (Subject to approval from CCAC Privacy Officers);
  - Message level validation and log analysis support, as required;
  - Log cleansing, message queue cleansing, and disablement of CHRIS Production to eHealth Ontario Clinical Validation Environment integration.
- Production enablement of Connecting Ontario CDR feed for the four cSWO CCACs upon completion of Clinical Validation by the CCACs:
  - Production environment systems integration;
  - Migration of all active Clients and Referrals from CHRIS Production Environment to eHealth Ontario Connecting Ontario CDR.

#### 1.3 Benefits

The cSWO program, which is eHealth Ontario's regional ehealth program for south west Ontario, will enhance sharing of information, communications and coordination between health care partners and providers. The implementation of the cSWO program is aligned with *Ontario's Action Plan for Health Care* and is key to the *Provincial Health Care Transformation* agenda.

cSWO program participants are hospitals, primary care, and community care. The EHR is used by health care professionals at approximately 2,000 organizations in South West Ontario, including the following **Community Care Access Centres (CCACs)**:

- Erie St. Clair (ESC)
- South West (SW)
- Waterloo Wellington (WW)
- Hamilton Niagara Haldimand Brant (HNHB)

cSWO is focused on enabling health care professionals to continue to provide excellent care for people across south west Ontario. This includes an integrated electronic health record (EHR), supported by a clinical data repository (CDR), and a regional clinical viewer integrated to local and provincial information sources. This allows practitioners within a patient's circle of care to access clinical information from multiple systems. This means improved quality of clinical decision making; less reliance on patient and family recall; increased engagement of patients and their families; and improved clinical outcomes.

#### 1.4 Functionality

**All Active** clients who have CHRIS records within the SWO CCACs will be shared with/sent to the Connecting Ontario CDR, including restricted clients:

- Consent Directive = Allow, if Client provides Consent to share data with the cGTA users
- **Consent Directive = Deny**, if Client does not provide Consent to share data with the cGTA users, or has restricted access enabled

When "shared data" changes in CHRIS, it triggers an automatic update to the Connecting Ontario CDR in real-time (i.e. within 5 minutes)

After the Connecting Ontario Viewer adoption is complete for the participating CCACs, CHRIS users will be able to launch the Viewer directly from CHRIS with auto-login and with the client they are viewing in CHRIS already selected in the CDR

The Client information that will be shared with the Connecting Ontario CDR is grouped into the following types:

- Client Demographic
  - · Client Demographic details
  - Primary Personal Contact
  - Active Medical Contact(s)
  - Primary Care Group Contact(s)
- Safety Issue(s)
- Risk Code(s)

- Assessment(s)
- Client Referral(s)
- Medical Equipment / Supply(s)
- Service Authorization(s)
- Service Provider Assignment(s)
- Coordinated Care Plan

# **2 CCAC Referral Enhancements**

Area	Details
Request for	A new drop down will contain Request for Information reasons. CCACs will have the
Information	option to disable reasons from the list of provincial reasons. For existing record the
0 11 41	Request for Information will default to 'Other'.
Cancellation	The 'Comments' field has been renamed 'Additional Information'. 'Additional Information' will be optional except when the cancellation reason of 'Other' is selected. The content from the 'Additional Information' field will be communicated to the referral source.  New cancellation reasons have been added:  • Condition Changed
	No OHIP Coverage
	Out-dated Information
Assessment	New Assessment Outcome Events have been added:
Outcome Events	No Services to be provided – Client Requires Services Not Provided by CCAC
	No Services to be provided – Condition Inappropriate
	No Services to be provided – Family Participation Not Available
	No Services to be provided – Home Not Suitable
	No Services to be provided – Needs Can Be Met As An Outpatient
	CCACs can indicate in CHRIS Maintenance if they would like to receive these cancellation event types. The enabled event types will be searchable in the eNotification queue.  Hospitals may need to make changes to their system in order to submit the new cancellation events.
Field Name	The 'Assessment not completed – Client deceased' field has been renamed 'Client
Change	deceased'.

# 3 eNotification Enhancements

Area	Details		
CCP Flag	A flag will be added to update messages to notify hospitals when a patient has a		
	Coordinated Care Plan in CHRIS.		
Cancellation	New cancellation reasons have been added in CHRIS:		
Reasons	Cancel Client admitted to Inpatient Unit		
	Cancel Client presented at ED		
	Cancel Client discharged from ED		
	Cancel Client discharged from Inpatient Unit		

Area	Details
	Cancel EMS Visit

# **4 Client Name Enhancements**

Client Services; External Partners
Client 'Surname', 'Middle' and 'First Name' fields
Will be extended to 50 characters.
The client middle name will display in client search results and will be included on the Client Details and Client Name History screens.
AcuteNet integration will be updated to include Middle Name.
eForm templates will be updated to include extended Surname and First Name.

# **5 Defect Resolutions**

SMA#	345763 ESC, MH, WW
Affects	Client Services; External Partners
	eForms do not populate suite Number
Description	None of the xxxAddressSummary fields contain the suite_number and it is not part of the xxxAddressStreet.
	Resolution
	CHRIS eForms template will be updated to include Suite # and Room # values.

SMA#	801809 NW
Affects	Client Services; External Partners

	Tracking ID Hyperlink for CCAC Referral Update Transmission Failures
	Tracking ID hyperlink for CCAC Referral Update failed transmission does not provide client/referral identifiers required for troubleshooting.
Description	Resolution
	Clicking on the hyperlink will display a pop-up window with the following information: eReferral Number, eReferral Source and Client Name. Re-Send button will be available in the pop-up.

# **6 Provincial Data Changes**

## **6.1 Allergies**

. i Allergies			
SMA#	813822 - CHAM 820760 - CENT 819505 - CHAM 782365 - CE 807092 - CHAM 811051 - CHAM 811047 - CHAM 828149 - CE 835777 - CHAM 842419 - MH 845507 - TC 846418 - HNHB 849979 - CHAM		
Affects	Client Services, Service Providers, Vendors, other External Partners		
	Updates for Allergy Types = Drug		
		Generic Name	Brand Name
	1	Denosumab	Prolia
	2	Alendronate	Fosamax
	3	Hydrocodone	PME-Hydrocodone, Hycodan
	4	Fesoterodine	Toviaz
Description	5	Bevacizumab	Avastin
	6	ACE Inhibitors	
	7	Salmeterol Xinafoate	Serevent Diskus, Advair Diskus, Advair HFA (combination)
	8	Tiotropium Bromide	Spiriva, Spiriva Respimat
	9	Carboplatin	Paraplatin, CARBOplatin Novaplus
	10	Atropine Sulfate	AtroPen
	11	Papaveerine	Pavabid

12	Tegaderm	
13	Rasburicase	Elitek, Fasturtec, Fasturtec(obs)
14	Docetaxel	Taxotere, Docefrez
15	Finasteride	Propecia, Proscar
16	Enzalutamide	Xtandi
17	Trandolapril	Mavik
18	Aripiprazole	Abilify, Abilify Discmelt

# **6.2 Discharge Dispositions**

SMA#			
Affects	Client Services; Service Providers		
7	Updated the Integration Code for existing discharge dispositions. For use by		
	providers when submitting APR messages:		
	Referral Type: Home Care Discharge Dispositions:  - Change Provider Due to Patient Move within LHIN (Service Not Discharged Integration Code: D39 - Service Delivery Change Integration Code: D42		
Description	Referral Type: School Discharge Dispositions:  - Change Provider Due to Patient Move within LHIN (Service Not Discharged - Service Delivery Change  Referral Type: School Discharge Integration Code: D38 Integration Code: D41		
	Referral Type: Other Reimbursed Program Discharge Dispositions:  - Admitted to Long Term Care Integration Code: D35 - Vacation >30 Days Integration Code: D36 - Died in Hospital Integration Code: D37 - Change Provider Due to Patient Move within LHIN (Service Not Discharged Integration Code: D40		
	- Service Delivery Change Integration Code: D43		

# 6.3 Diagnosis

SMA#	800110 HNHB 829886 ESC	
Affects	Client Services, Service P	roviders, Vendors, other External Partners
Description	Request to add diagnosi  Description	is ICD9 Code
Bootilphon	Dementia unspecified	294.2
	Chronic Pain NEC	338.2

## 6.4 Health Links

SMA#	862326 - CHAM
Affects	Client Services, Service Providers, Vendors, other External Partners
	Added new Health Link (available under Client Coding):
Description	1. Health Link in Champlain LHIN:
	East Ottawa Health Link

# 6.5 Service Delivery Type

SMA#	849231 - ESC	
Affects	Client Services; Service Providers	
	<ul> <li>A new Service Delivery Type has been added under Service Type 'eHomecare':</li> <li>Service Delivery Type: 'Visit Integrated DTh - Tech' (ID = 1223)</li> <li>Description: 'Visit Integrated Directing Therapist - Technician home'</li> <li>Service Delivery Unit (authorization &amp; billing): Visit</li> <li>Functional Centre: 'In home OT' (725 304 055)</li> </ul>	
Description	Reporting Unit: Visit  Note: This service delivery type has been added to all CCAC Training and Production environments in an 'Inactive' state except for ESC Training environment, where it has been added as 'Active'.  CCAC's the twent to patients this parties delivery type will fall out to a standard CMA.	
	CCAC's that want to activate this service delivery type will follow the standard SMA process.	

SMA	N/A
Affects	Client Services; Service Providers
Description	A new Service Delivery Type has been added under Service Type 'Nursing':  • Service Delivery Type: 'Respite - Caregiver Distress Nursing' (ID = 1224)  • Description: 'Respite - Caregiver Distress Shift Nursing'  • Service Delivery Unit (authorization & billing): Hour  • Functional Centre: 'Respite Service' (725 3545)  • Reporting Unit: Hour  Note: This service delivery type has been added to all CCAC Training and Production environments in an 'Inactive' state.  CCAC's that want to activate this service delivery type will follow the standard SMA process.

SMA	867673
Affects	Client Services; Service Providers
Description	A new Service Delivery Type is being added under Service Type 'eHomecare' (ID = 219)  Service Delivery Type: 'Respite - Caregiver Distress eShift' (ID = 1225) Description: 'Respite - Caregiver Distress eShift' Service Delivery Unit (authorization & billing): Hour Functional Centre: 'Respite Service' (725 3545) Reporting Unit: Hour
	Note: This service delivery type will be added to all CCAC Training and Production environments in an 'Inactive' state.
	CCAC's that want to activate this service delivery type will follow the standard SMA process.

# 6.6 PO Cancellation Reason

SMA#	847957 - WW
Affects	Client Services; Vendors
	Request to add a new Purchase Order Cancellation Reason
	Delivery Requirements Not Met
Description	<ul> <li>This new cancellation reason will support tracking and reporting back to vendors what the reason was for a cancelling a purchase order.</li> </ul>
	This cancellation reason will be available to all CCACs in the 'Reason for Cancellation' drop-down in the Cancel Purchase Order screen.